# SANDY CITY STATE OF UTAH

## **CDBG Quarterly Status/Benefit Data Report**

(Revised February 2003)

Sandy City Community Development Department 10000 Centennial Parkway, Sandy, UT 84070 Telephone (801)568-7261; FAX# (801)568-7278

City Contact Person: Brok Armantrout, 801-568-6071, email: sandypo.barmantr@state.ut.us					
Subrecipient Name:					
Project Title:					
Fiscal Year:	Report Date:				
	9/30 12/31 3/31 6/30 ar begins July 1. Beneficiary data needs to be submitted on a quarterly data covering the period July 1 through June 30. Reports are due within				
Identify any problems and major benchmarks any additional information. If the program has	ts and status of the project for this reporting period:  Note any change in the program or activity. Please feel free to attach a major, positive outcome, please attach a narrative. (This is the space is also the space to give your Project Manager a heads-up if things are				
Total Number of Female Head of House	sehold served:				

### CDBG BENFICIARY DATA REPORTING (PERSONS)

		eflect unduplicated persons). (Definitions and Income Lev			
			NEW	Ongoing	Total
,		Number of Moderate-Income Persons Served (51% - 80% of median family income)			
2		Number of Low-Income Persons Served (31% - 50% of median family income)			
(		Number of Very Low-Income Persons Served (0 - 30% of median family income)			
4		Total number of Lower Income CDBG Assisted (Sum of lines 1, 2 and 3)			
	since .	or of total unduplicated (NEW) City CDBG-assisted client July 1) from Line A <b>or</b> total of Line D <b>or</b> total of Line E. arter Ending (QE) 9/30 + QE 12/31 + QE 3/30 + QE 6/3		ıram year regardle	ss of income
D. ETHNIC Data for NEW City CDBG-assisted clients served this report period only: (Regardle					
	His	spanic			
	No	n-Hispanic			
	Tota	al of D should be the same number reported in A or the total of E			
E. RA	CIAL	Data for NEW City CDBG-assisted clients served this re	eport period only:	(Regardless of income	)
		White			
		Black/African American			
		Asian			
		American Indian/Alaskan Native			
		Native Hawaiian/Other Pacific Islander			
		Native Hawaiian/Other Pacific Islander  American Indian/Alaskan Native & White			
		_			
		American Indian/Alaskan Native & White			
		American Indian/Alaskan Native & White Asian & White	American		

I hereby certify that the documentation, inco- activities are on file at this agency.	me, names, and addresses of clients, supporting these figures	s, and
Signature		
Name - Typed/Printed/Legible	Phone	
	_	

#### **BENEFICIARY DATA SUMMARY - DEFINITIONS & GUIDELINES**

Beneficiary data will be required for each quarter starting with the grant award and continuing until the issuance of a Project Close-Out form from this office.

#### **Definitions**

**New:** All clients who are served in the First Quarter are considered new (regardless of previous participation). Only those clients that were not reported in the First Quarter report are considered new in the remaining reports.

**Program-wide** includes all clients in the program, regardless of funding source or residency. This includes people in other cities and/or counties, if applicable.

**City:** In accordance with HUD regulations, (¶570.309), and City policy, the City will only reimburse organizations for clients that live in Sandy City.

Family means all persons living in the same household who are related by birth, marriage or adoption.

**Household** means all the persons who occupy a housing unit. The occupants may be a single family, one person living alone, two or more families living together, or any other group of related or unrelated persons who share living arrangements.

#### Income

For the purpose of determining whether a family or household is low- and moderate- income, you must use the following definition of income:

Adjusted gross income as defined for purposes of reporting under Internal Revenue Service (IRS) Form 1040 for individual Federal annual income tax purposes.

Estimate the annual income of a family or household by **projecting** the prevailing rate of income of each person **at the time assistance is provided** for the individual, family, or household (as applicable). Estimated annual income shall include income from all family or household members, as applicable. Income or asset enhancement derived from the CDBG-assisted activity shall not be considered in calculating estimated annual income.

# Listed below are income ranges for moderate, low and very low income CDBG INCOME LIMITS EFFECTIVE April 1, 2002

Family Size	Very Low Income	Low Income	<u>Moderate</u>
1	\$12,000	\$20,000	\$32,050
2	\$13,750	\$22,900	\$36,600
3	\$15,450	\$25,750	\$41,200
4	\$17,150	\$28,600	\$45,750
5	\$18,550	\$30,900	\$49,400
6	\$19,900	\$33,200	\$53,100
7	\$21,300	\$35,450	\$56,750
8	\$22,650	\$37,750	\$60,400